Required format for a statewide general or special election vote-by-mail ballot application Size 8½ x 5½"

IMPORTANT: You must enter the date and type of the election, as well as the last day the application must be received by the elections official.

APPLICATION FOR A VOTE-BY-MAIL BALLOT FOR THE , ELECTION				
	(month, day, year)	(type of election)	FOR OFFICIAL USE ONLY	
To obtain a vote-by-mail ballot, complete the information on this form. This application must be received by the elections official no later than 5 pm on				
1. PRINT NAME:	2. DATE OF BIRTH: —			
		mo/day/yr		
First Name Middle Name or Initial Last Name 3. RESIDENCE ADDRESS (please print):				
Number and Street - as registered (P.O. Box, Rural Route, etc. not acceptable) (Designate N, S, E, W if used)			NOTICE You have the legal right to mail or deliver this application	
City	County	ZIP Code	directly to the local elections official of the county where you reside. Returning this application to anyone other than	
4. TELEPHONE NUMBER:	())	your elections official may cause a delay that could interfere	
	daytime (optional)	evening (optional)	with your ability to vote.	
5. PRINT MAILING ADDRESS FOR BALLOT (IF DIFFERENT FROM ABOVE): NOTE: Organizations distributing this form may not preprint mailing address information.			PERMANENT VOTE-BY- MAIL VOTER Check here to become a Permanent Vote-By-Mail Voter. Any voter may request to be a Permanent Vote-By- Mail Voter. If you check the box above and sign here:	
Number and Street/P.O. Box (Designate N, S, E, W if used)			a vote-by-mail ballot will automatically be sent to you for future elections. Failure to vote in two consecutive statewide	
City U.S.	City U.S. State or Foreign Country ZIP Code		general elections. raintie to vote in two consecutive statewide general elections will cancel your Permanent Vote-By-Mail Voter Status and you will need to reapply. If you have any	
6. THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT THE PROPER SIGNATURE OF THE APPLICANT			questions concerning voting by Vote-By-Mail Ballot, telephone your county of residence Elections office. Elections Code Sections 3201, 3206	
There are control for any de Tine and a control for a cost be small bellet from any other invitation for this election. I config				
I have not applied for, nor do I intend to apply for, a vote-by-mail ballot from any other jurisdiction for this election. I certify under penalty of perjury under the laws of the State of California that the name and residence address and information I have				
provided on this application are true and correct.			The format used on this application MUST be used by ALL	
			individuals, organizations and groups that distribute vote-by- mail ballot applications. Elections Code Sections 3007	
SIGNATURE Date			Failure to conform to this format may result in criminal	
WARNING: Perjury is punishable by imprisonment in state prison for two, three or four years. (Section 126 of		ction 126 of the California Penal Code)	prosecution. Elections Code Sections 18402	
7. THIS FORM PROVIDED BY:				
IMPORTANT: Organizations providing this form must enter their name, address and telephone number.				